2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Felix Perez SIGNATURE AND TYPED GRAPHATED MAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Felix Perez, Jr

Jan 31, 2005 08:00 AM **DOCUMENT # P01000000968 Secretary of State** 1. Entity Name APPRAISAL ONE OF POLK COUNTY, INC. Principal Place of Business Mailing Address 3800 THRONEHILL RD. 3800 THRONEHILL RD. WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880 01242005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3689379 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent PEREZ, FELIX E JR DO NOT WRITE 3800 THONHILL ROAD WINTER HAVEN, FL 33880 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME PEREZ, FELIX STREET ADDRESS 3800 THORNHILL ROAD CITY-ST-ZIP WINTER HAVEN, FL 33880 HUUUUU TARKE ~1731705-80024-MA 150.00 VP8 TITLE NAME PEREZ, JANET E STREET ADDRESS 3800 THORNHILL ROAD CITY-ST-ZIP WINTER HAVEN, FL 33880 **TITLE** NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED